

BEST AVAILABLE COPY

# CLAIMS ONLY

Application Number

10/705,628

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			1			
2				1		
3				1		
4				3		
5				3		
6				1		
7				1		
8			1			
9			1			
10				2		
11				2		
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Total Indep			3			
Total Depend			14			
Total Claims			17			

  

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						